

Booking Enquiry Form

Please complete the form with as much detail as possible

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| --- | --- | --- | --- |
| Name |  | | |
| Address |  | | |
| Tel. |  | Email |  |

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| --- | --- | --- | --- |
| College Member |  | University Member |  |

|  |  |
| --- | --- |
| Event Details | |
| Event Title |  |
| Purpose of The Event |  |
| Name of the Organisation |  |
| Date and Time of the Event |  |
| Nature of Event (Academic/Non-Academic) |  |
| Total Number of Attendees |  |
| Number of St Edmund’s College Members |  |
| Number of Non-St Edmund’s College Members |  |
| Name(s) of Key Speaker(s) |  |
| Is the Speaker a Member of the University |  |
| How will the event be publicised |  |

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| Please indicate if you have a Function Room preference, layout and if AV required |
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| Please indicate your catering requirements |
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| Names of attendees, CRSID & College |
|  |

**Please Submit All Final Details 10 Days Before The Event**

**To be completed and emailed to** [**conference.coordinator@st-edmunds.cam.ac.uk**](mailto:conference.coordinator@st-edmunds.cam.ac.uk)

**OFFICE USE ONLY - Authorisation to hold the event:**

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| Date and Signature of Head of Domestic Operations |
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| --- |
| Booking Reference No. |
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COVID-19 Protocol for use of College function rooms

The following protocol is to reduce the risk of infection transmission for students, staff and other groups when using College function rooms.

**AWARENESS OF PROTOCOL**

* All rooms in which events take place need to display this protocol
* People who booked the room are responsible for briefing all attendees about the protocol

**PRIOR TO USE OF THE ROOM**

* The room has to be cleaned by the housekeeping staff
* The room needs to be prepared by the facility staff following the agreed configuration

**ARRIVAL AND ACCESS TO THE ROOM**

* If you are experiencing any COVID-19 symptoms, even if mild, please do not attend
* Face coverings are expected to be worn once inside all buildings and not removed until seated in the room on agreement from all attending.
* Hand sanitiser need to be used upon entering the building/room
* The use of lifts is not recommended

**SOCIAL DISTANCING, FACE COVERING AND VENTILATION**

* No more than the maximum number of persons designated are permitted
* Two meters social distancing has to be observed all the time
* Face covering needs to be worn when moving around the room.
* Windows are to be opened to provide ventilation
* Where possible, doors should be left open to encourage ventilation

**SHARED EQUIPMENT**

* Books, pens, and electronic equipment should not be shared
* Whiteboards and pens may be provided on advance request

**HYGIENE**

* Hand sanitiser, gloves and wipes are available in each room
* Designed toilets with hand washing facilities will be allocated



Event Organiser Checklist

**To be completed and emailed to** [**conference.coordinator@st-edmunds.cam.ac.uk**](mailto:conference.coordinator@st-edmunds.cam.ac.uk) **at least 24 hours before the event.**

|  |  |
| --- | --- |
| Checklist (Yes/No) | |
| Issued the ‘COVID-19 Protocol for use of College function rooms’ to all attendees |  |
| Read and understand the ‘COVID-19 College function room risk assessment’ |  |
| Do you require an additional risk assessment due to the nature of the event?  If yes, this must be provided by the organiser at least 24 hours before the event. |  |
| Provided the list of names of attendees - with CRSID and College (if applicable) |  |

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| --- |
| Date and Signature of Event Organiser |
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